

DATE : **January 30, 2002**

Paper No.: \_\_\_\_\_

TO : Supervisor, Art Unit **1614**SUBJECT : Certificate of Correction Request in Patent No.: **6,063,381**

A response to the following question(s) is requested with respect to the accompanying request for a certificate of correction.

- ☐ 1. Would the change(s) requested, under 37 C.F.R. 1.323, correcting Applicant/Attorney's (A or Atty.) errors, constitute new matter or require reexamination of the application?
- ☐ 2. Would the change(s) requested, under 37 C.F.R. 1.323, correcting Applicant/Attorney's (A or Atty.) errors, materially affect the scope or meaning of the claims allowed by the examiner in the patent?
- ☐ 3. Applicant disagrees with change(s) initialed and dated by Examiner. Should the change request be granted?
- ☒ 4. With respect to the change(s) requested, correcting Office and/or printing (A or Atty.) errors, should the patent read as shown in the Petition?
- ☐ 5. If the amendment received on \_\_\_\_\_, had been considered by the Examiner, would the amendment have been entered?

**PLEASE RESPOND WITHIN 7 DAYS AND RETURN THE FILE TO**  
**PALM LOCATION. 7580,**  
**CERTIFICATES OF CORRECTION BR, PARK 3 -922,**  
**Thank you**

*Ernest White*

Legal Instrument Examiner  
 Tel. No. 305-8339

PLEASE CHECK THE BOX(ES) BELOW CORRESPONDING TO THE BOXES CHECKED FOR QUESTION(S)  
 ABOVE AND RETURN FILE TO: PALM LOCATION 7580, CERT. OF CORREC. BR., PK 3 - 918

DATE: \_\_\_\_\_

The decision regarding the change(s) requested in the certificate of correction is shown below.

- |  |                             |   |
|--|-----------------------------|---|
| <input type="checkbox"/> 1. YES            | <input type="checkbox"/> NO | <input type="checkbox"/> Comments below |
| <input type="checkbox"/> 2. YES            | <input type="checkbox"/> NO | <input type="checkbox"/> Comments below |
| <input type="checkbox"/> 3. YES            | <input type="checkbox"/> NO | <input type="checkbox"/> Comments below |
| <input checked="" type="checkbox"/> 4. YES | <input type="checkbox"/> NO | <input type="checkbox"/> Comments below |
| <input type="checkbox"/> 5. YES            | <input type="checkbox"/> NO | <input type="checkbox"/> Comments below |

☐ Comments \_\_\_\_\_

*Kevin E. Weddington*  
**Primary Examiner**  
**Art Unit 1614**

Supervisor

1614  
Art Unit